

United States Bankruptcy Court
Middle District of North CarolinaVOLUNTARY
PETITION

IN RE (Name of debtor- If individual, enter Last, First, Middle) OLLIE, Dorothea		Name of Joint Debtor (Spouse)(Last, First, Middle)	
All Other Names used by the debtor in the last six years BARNES, Dorothea		All Other Names used by the joint debtor in the last six years	
Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (If more than one, state all) 2929		Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (If more than one, state all)	
Street Address of Debtor (No. and street, city, state and zip code) 2614 Lincoln Street Durham, NC 27707		Street Address of Joint Debtor (No. & street, city, state and zip code)	
Telephone: (919) 801-6984 (Cell)	County of Residence or Principal Place of Business Durham		County of Residence or Principal Place of Business
Mailing Address of Debtor (If different from street address)		Mailing Address of Joint Debtor (If different from street address)	
Location of Principal Assets of Business Debtor (If different from addresses listed above)		Venue (Check one box)	
Business Telephone No.		<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.	

Information Regarding Debtor (Check applicable boxes)

Type of Debtor (Check one box) <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Joint (Husband & Wife)	Chapter or Section of Bankruptcy Code under Which the Petition Is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Sec 304-Case Ancillary to Foreign Proceeding
Nature of Debt (Check one box) <input checked="" type="checkbox"/> Non Business/Consumer <input type="checkbox"/> Business--Complete A & B Below	Small Business (Chapter 11 only) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)
A. Type of Business (Check one) <input type="checkbox"/> Farming <input type="checkbox"/> Transportation <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Professional <input type="checkbox"/> Manufacturing/ Mining <input type="checkbox"/> Construction <input type="checkbox"/> Retail/Wholesale <input type="checkbox"/> Real Estate <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Other Business	Filing Fee (Check one box) <input checked="" type="checkbox"/> Filing fee attached <input type="checkbox"/> Filing fee to be paid in installments (Applicable to individuals only.) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.
Briefly Describe Nature of Business	Name and Address of Law Firm or Attorney John W. Wall, Jr., 604 Green Valley Road, Suite 210, Greensboro, NC 27408 Telephone No. (336) 274-2343 State Bar No. 6427
	Name(s) of Attorney(s) Designated to Represent the Debtor (Print or Type Names)

Statistical/Administrative Information (28 U.S.C. § 604)
(Estimates Only) (Check applicable boxes)

<input checked="" type="checkbox"/> Debtor estimates that funds will be available		Debtor is not represented by an attorney. Telephone number of debtor not represented by an attorney	
<input type="checkbox"/> Debtor estimates that, after any exempt property paid, there will be no funds available for distribution			
Estimated Number of Creditors	1-15 16-49 50-99 100-199 200-999 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Judge: Judge James B. Wolfe Jr.	
Estimated Assets (in thousands of dollars)	Under 50 50-99 100-499 500-999 1000 <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Trustee: Richard M Hutson, II	
Estimated Liabilities (in thousands of dollars)	Under 50 50-99 100-499 500-999 1000 <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Debtor(s): Dorothea Ollie	
Estimated Number of Employees - Ch. 11 & 12	0 1-19 20-99 100-999 1000 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	First Meeting of Creditors 11:00 PM, June 25, 2004 Creditors Meeting Room, 4th Floor The Durham Centre 300 West Morgan Street Durham, NC 27701	
Estimated Number of Equity Security Holders	1-19 20-99 100-999 1000 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

UNITED STATES BANKRUPTCY COURT
Middle District North Carolina

RECEIPT

Case # 04-81546 drnmjb

Chapter 13

000130510 - GL

Filed: 01:49 PM, 05/20/04

Durham

01:52 PM, May 20, 2004

Code	Qty	Amount
13	1	\$194.00

ORIGINAL

TOTAL PAID: \$194.00

From: John W Wall
Suite 210
604 Green Valley Rd
Greensboro, NC 27408

1

Case 04-81546 Doc 1 Filed 05/20/04 Page 1 of 15

FEES PAID IN FULL

REQUEST FOR RELIEF

The debtor is an individual with regular income who owes, as of the date of the filing of this petition, noncontingent, liquidated, unsecured debts of less than \$290,525.00 and noncontingent liquidated secured debts of less than \$871,550.00 and hereby requests relief in accordance with Chapter 13 of Title 11, United States Code.

Annexed hereto are schedules which set forth accurate descriptions and valuations of all the items of property, real and personal and a complete statement of all debts with the full names and addresses of all creditors.

SIGNATURES

Date: May 17, 2004

Signed: _____



Attorney for Debtor
John W. Wall, Jr.

Dorothea Ollie

(I) (We), _____, declare under penalty of perjury that the information provided in this petition and schedules attached hereto is true and correct to the best of my knowledge, information and belief and that I am aware that I may proceed under Chapters 7 or 11 of Title 11, United States Code, understand the relief available under such chapters and choose to proceed under Chapter 13.

Date: May 17, 2004

Signed: _____



Debtor

Signed: _____

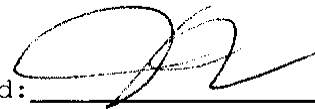
(Joint Debtor, if any)

AFFIDAVIT OF ATTORNEY

I, the undersigned attorney for the Debtor named in the foregoing petition, declare that I have informed the Debtor that the Debtor may proceed under Chapter 7, 11 or 13 of Title 11, United States Code, and have explained the relief available under each such chapter.

Date: May 17, 2004

Signed: _____



Attorney for Debtor
John W. Wall, Jr.
P.O. Box 1318
Greensboro, NC 27402
(919) 279-1007
NC State Bar No. 6427

NOTE: Petition with schedules are filed in duplicate originals (only the original needs to be signed with all copies conformed) with the U.S. Bankruptcy Court with filing fee of \$160.00. A joint petition requires only one filing fee.

SCHEDULE A
REAL PROPERTY AND MOBILE HOMES

<u>Description</u>	<u>Name and Address of Lienholder</u>	<u>Total Amount Of Debt</u>	<u>Monthly Payment</u>	<u>Present Market Value Without Deduction For Mortgage or Security Interest</u>
Home at 2614 Lincoln St. Durham, NC	Wells Fargo Home Mortgage, Inc. 3476 Stateview Blvd. Ft. Mill, SC 29715	90,000.00	699.81	98,500.00
House at 407 Columbia Ave. Durham, NC (boarding house)	Saxton Mortgage PO Box 161489 Ft. Worth, TX 76161-1489	80,000.00 (Estimate)	734.90	85,500.00

Total of A: \$ 184,000.00

Estimated arrearage: Wells Fargo - \$15,600.00 through May, 2004
 Saxton - \$14,675.00 through May, 2004

SCHEDULE B
PERSONAL PROPERTY

Type of Property	Amount of Mortgage or Other Security Interest on This Property	Name of Creditor Abbreviate - Full Name & Address Must Be on List of Debts	Present Market Value Without Deduction For Mortgage or Security Interest
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Automobiles or
Other Vehicles -
Give Year and Make

1998 Monte Carlo	2,800.00	SSI	3,000.00
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Household Goods

1,370.00

Personal Effects

150.00

Other (Specify)

Medical instruments	300.00
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Tax Refunds Indicate what tax refunds (income or other), if any, to which either you or your spouse are entitled (give particulars including information as to any refunds payable jointly with any other person).

Bank Accounts and Safe Deposit Boxes If you or your spouse currently have any bank or savings and loan accounts, checking, or savings, give name and address of bank, nature of account, current balance, name and address of each person authorized to make withdrawals from the account (if none, so state).

Mechanics & Farmers Bank - checking	700.00
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Total of B: \$ 5,520.00

THE LIQUIDATED VALUE OF DEBTOR'S ESTATE AFTER DEDUCTING MORTGAGES AND OTHER VALID LIENS IS APPROXIMATELY \$_____.

**UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF NORTH CAROLINA**

In the Matter of:

DOROTHY OLLIE

Debtor.

Case No. B-

DEBTOR'S CLAIM FOR
PROPERTY EXEMPTIONS

I, Dorothy Ollie, the undersigned debtor, hereby claim the following property as exempt pursuant to Chapter 11 U.S.C. §522(b)(2)(A) and (B), the Laws of the State of North Carolina, and non-bankruptcy federal law.

1. REAL OR PERSONAL PROPERTY USED BY DEBTOR OR DEBTOR'S DEPENDENT AS RESIDENCE OR BURIAL PLOT. (NCGS 1C-1601(a)(1). Total net value not to exceed \$10,000. Amount of the unused portion of first \$3,500 may be carried forward to be applied on other property claimed as exempt.)

Description of Property & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
Home at 2614 Lincoln St. Durham, NC	98,500.00	Wells Fargo	90,000.00	8,500.00

(a) Total Net Value 8,500.00
Total Net Exemption 8,500.00

(b) Unused portion of first \$3,500. (This amount, if any, may be used to claim an exemption in any property owned by the debtor.)

2. MOTOR VEHICLE. (NCGS 1C-1601(A)(3). (Only one vehicle allowed under this paragraph with net value claimed as exempt not to exceed \$1,500 plus any portion desired for use from paragraph 1(b) above.)

Model, Year Style of Auto	Market Value	Lien Holder(s)	Amt. Lien	Net Value
1998 Monte Carlo	3,000.00	SSI	2,800.00	200.00

(a) Statutory allowance \$1,500.00
(b) Amount from 1(b) above to be used in this paragraph. \$
(A part or all of 1(b) may be used as needed.)

Total Net Exemption \$200.00

3. TOOLS OF TRADE OR PROFESSIONAL BOOKS. (NCGS 1C-1601(a)(5). Used by Debtor or Debtor's dependent. Total net value of all items claimed as exempt not to exceed \$750.00.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
Blood pressure cup, stethoscope, miscellaneous	300.00			300.00

(a) Statutory allowance \$ 750.00
(b) Amount from 1(b) above to be used in this paragraph. \$
(A part or all of 1(b) may be used as needed.)

Total Net Exemption \$300.00

4. PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES NEEDED BY DEBTOR OR DEBTOR'S DEPENDENTS. (NCGS 1C-1601(a)(4) Debtor's total net value not to exceed \$3,500 plus \$750 for each dependent, but not to exceed \$3,000 total for all dependents.)

Description of Property	Market Value	Lien Holder(s)	Amt. Lien	Net Value
Clothing & Personal	100.00			100.00
Kitchen Appliances	50.00			50.00
Stove	200.00			200.00
Refrigerator	200.00			200.00
Freezer				
Washing Machine	50.00			50.00
Dryer	50.00			50.00
China	10.00			10.00
Silver	10.00			10.00
Jewelry	50.00			50.00
Living Room Furniture	25.00			25.00
Den Furniture				
Bedroom Furniture	25.00			25.00
Dining Room Furniture				
Lawn Furniture				
Television	150.00			150.00
(X) Stereo () Radio	25.00			25.00
Musical Instruments				
() Piano () Organ	500.00			500.00
Air Conditioner/Dehumid.	50.00			50.00
Paintings & Art				
Lawn Mower	25.00			25.00
Yard Tools				
Crops				
Animals				
Other ()				

Total Net Value \$1,520.00

- (a) Statutory allowance for debtor
 (b) Statutory allowance for Debtor's dependents: 0 dependent
 at \$750 each (not to exceed \$3,000 for total dependents)
 (c) Amount from 1(b) above to be used in this paragraph.
 (A part or all of 1(b) may be used as needed.)

\$ 3,500

Total Net Exemption \$1,520.00

5. LIFE INSURANCE. (As provided in Article X, Section 5 of North Carolina Constitution.)

Name of Insurance Company: AARP Policy No. To be furnished
 Name of Insured: Debtor Policy Date _____
 Name of Beneficiary: Daughters - no cash value

6. PROFESSIONALLY PRESCRIBED HEALTH AIDS (FOR DEBTOR OR DEBTOR'S DEPENDENTS).
(NCGS 1C-1601(a)(7). No limit on value or number of items.)

Description: None

7. DEBTOR'S RIGHT TO RECEIVE FOLLOWING COMPENSATION: (NCGS 1C-1601(a)(8). (no limit on number or amount.)

- A. \$ None Compensation for personal injury to debtor or to person on whom debtor was dependent for support.
B. \$ None Compensation for death of person on whom debtor was dependent for support.

8. INDIVIDUAL RETIREMENT ACCOUNTS, INDIVIDUAL RETIREMENT ANNUITIES AND TRUST ACCOUNTS AS DESCRIBED IN SECTION 408(a),(b) and (c) OF THE INTERNAL REVENUE CODE:
(NCGS 1C-1601(a)(9). (No limit on number or amount.)

Detailed Description	Value
None	

9. ANY OTHER REAL OR PERSONAL PROPERTY WHICH DEBTOR DESIRES TO CLAIM AS EXEMPT THAT HAS NOT PREVIOUSLY BEEN CLAIMED ABOVE. (NCGS 1C-1601(a)(2). (THE AMOUNT CLAIMED MAY NOT EXCEED THE REMAINING AMOUNT AVAILABLE UNDER PARAGRAPH 1(b) WHICH HAS NOT BEEN USED FOR OTHER EXEMPTIONS.)

Description	Market Value	Lien Holder	Amt. Lien	Net Value
(a) Total Net Value of property claimed in paragraph 9.				\$
(b) Total amount available from paragraph 1(b).			\$	
(c) Less amount available under paragraph 1(b) which was used in other paragraphs:				
Paragraph 2(b)			\$	
Paragraph 3(b)			\$	
Paragraph 4(c)			\$	
Net Balance Available from paragraph 1(b)				\$
Total Net Exemption				\$

10. OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:

Aid to the Aged, Disabled and Families with Dependent Children, NCGS 108A-36	
Aid to the Blind, NCGS 111-18	
Yearly Allowance for Surviving Spouse, NCGS 30-15, NCGS 30-33	
North Carolina Local Government Employees Retirement Benefits, NCGS 128-31	
North Carolina Teachers and State Employees Retirement Benefits, NCGS 135-9	
Firemen's Relief Fund Pensions, NCGS 118-49	
Fraternal Benefit Society Benefits, NCGS 58-283	
Workers Compensation Benefit, NCGS 97-21	
Unemployment Benefits, so long as not commingled and except for debts for necessities purchased while unemployed, NCGS 96-17	
Group Insurance Proceeds, NCGS 58-213	
Partnership Property, except on a claim against the partnership, NCGS 59-55	
Wages of a Debtor Necessary for Support of Family, NCGS 1-362	
Other	
TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT	\$ <u>None</u>

11. EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:

Foreign Service Retirement and Disability Payments, 22 U.S.C. §1104 _____
Social Security Benefits, 42 U.S.C. §407 _____
Injury of Death Compensation Payments from War Risk Hazards, 42 U.S.C. §601 _____
Wages of Fishermen, Seamen and Apprentices, 46 U.S.C. §601 _____
Civil Service Retirement Benefits, 5 U.S.C. §§729, 2265 _____
Longshoremen an Harbor Workers Compensation Act Death and Disability
Benefits, 33 U.S.C. §916 _____
Railroad Retirement Act Annuities and Pensions 45 U.S.C. §228(L) _____
Veterans Benefits, 45 U.S.C. §352(E) _____
Special Pension Paid to Winners of Cong. Medal of Honor, 38 U.S.C. §3101 _____
Federal Homestead Lands, on Debts Contracted Before the Issuance of the
Patent, 43 U.S.C. §175 _____
Other _____

TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT \$ None

12. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. §522(b)(2)(B) and the laws of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
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None

VALUE OF ENTIRETIES PROPERTY CLAIMED AS EXEMPT \$ _____

13. THE FOLLOWING TANGIBLE PERSONAL PROPERTY WAS PURCHASED BY THE DEBTOR WITHIN 90 DAYS OF THE FILING OF THE BANKRUPTCY PETITION:

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
<u>None</u>	_____	_____	_____	_____

None of the property listed in paragraph 11 has been included in this Request for Exempt Property.
(Tangible personal property purchased within 90 days of the filing of the petition cannot be exempted.)

14. DESCRIBE BELOW ANY 401(K) PLANS, PENSION PLANS, PROFIT SHARING PLANS, ETC., IN WHICH THE DEBTOR HAS AN INTEREST WHICH ARE NOT LISTED IN DEBTOR'S SCHEDULES OR STATEMENT OF FINANCIAL AFFAIRS OR IN ANY PRECEDING PARAGRAPH OF THIS FORM.

Description	Value
_____	_____
_____	_____

DATE: 5/17/04

Dorothea Ollie
Debtor

SCHEDULE C
PROPERTY CLAIMED AS EXEMPT

Use Local Form 91-C to claim property exemptions. A separate form is to be filed for each Debtor. Copies of Form 91-C are available from the Clerk of the Bankruptcy Court.

SCHEDULE D
SECURED CREDITORS

(List all lienholders including real estate and mobile homes)

<u>Full Name, Mailing Address, and Account Number of Each Creditor</u>	<u>Brief Description of Security for Each Debt</u>	<u>Monthly Payment</u>	<u>Total Amount Remaining Due or Claimed</u>
Wells Fargo Home Mortgage, Inc. 3476 Stateview Blvd. Ft. Mill, SC 29715 Acct. 9693374	Home	699.81	90,000.00
H. Terry Hutchens, Trustee PO Box 1028 Fayetteville, NC 28302			
Saxton Mortgage PO Box 161489 Ft. Worth, TX 76161-1489 Acct. 011470075	Boarding house at 407 Columbia Ave.	734.90	80,000.00
Elizabeth B. Ells or David W. Neill, Trustee 8520 Cliff Cameron Drive, Suite 300 Charlotte, NC 28269			
Systems & Services Technology 1998 Monte Carlo c/o The Ramsey Law Firm, PC PO Box 200847 Arlington, TX 76006 Acct. 1708700/95026		430.40	2,800.00

Total of D: \$ 172,800.00

SCHEDULE E
PRIORITY CREDITORS

	Amount Due or Claimed
Internal Revenue Service, 320 Federal Pl., Greensboro, NC 27401 United States	\$ <u>32,000.00</u>
State of North Carolina	\$ _____
Local County Tax	\$ _____
Local City Tax	\$ _____
Other	\$ _____
Total of E: \$ <u>32,000.00</u>	

SCHEDULE F
UNSECURED CREDITORS

<u>Full Name and Mailing Address of Each Creditor and Account Number</u>	<u>Total Amount Remaining Due or Claimed</u>
Providian PO Box 660022 Dallas, TX 75266-0022 Acct. 4479470400883379	Unknown
US Department of Education 2221 Niagara Falls Blvd. Niagara Falls, NY 14304 Acct. 246-70-2929	Unknown
US Attorney Middle District PO Box 1858 Greensboro, NC 27402	
Mastercard Bank One PO Box 85147 Richmond, VA 23276 Acct. 5291151917304386	Unknown
Capital One PO Box 85015 Richmond, VA 23285 Acct. 5291151917304386	500.00
Bank of America PO Box 2278 Norfolk, VA 23501 Acct. 4319030007551398 Acct. 4319040003447004	3,000.00 1,000.00
EMC Lockbox 8682 PO Box 75848 St. Paul, MN 55175 Acct. NECY246-70-2929	18,000.00
The Cadle Co. 100 N. Center St. Newton Falls, OH 44444 Acct. 0U091206	Unknown and disputed

Total of F: \$ 22,660.00

NOTE: If additional space is needed, please identify schedule by letter (i.e., Schedule F continued).

SCHEDULE G
EXECUTORY CONTRACTS AND UNEXPIRED LEASES

<u>Name and Address of</u> <u>Parties to Lease or Contract</u>	<u>Description of Contract or</u> <u>Lease and Nature of Debtor's</u> <u>Interest, State Whether Lease Is</u> <u>for Nonresidential Real Property</u>
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None

SCHEDULE H
CODEBTORS

Name and Address
of Codebtor

Name and Address
of Creditor

None

NOTE: A party listed under Schedule G or H will not receive notice unless the party is also scheduled in the appropriate schedule of creditors.

SCHEDULE I
CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a Chapter 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

<u>Debtor</u>	<u>Spouse</u>
Employer: <u>Self</u>	_____
Address: _____	_____
_____	_____
Length of Employment <u>10 years</u>	_____
Position/Job <u>CNA</u>	_____

Debtor's Marital Status	<u>Dependents of Debtor and Spouse</u>		
	Names	Age	Relationship
Single	None		

Income: (estimate of average monthly income)	DEBTOR	SPOUSE
Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ _____	\$ _____
Estimate monthly overtime.	\$ _____	\$ _____
SUBTOTAL	\$ _____	\$ _____
LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security.	\$ _____	\$ _____
b. Insurance.	\$ _____	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify).	\$ _____	\$ _____
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ _____	\$ _____
TOTAL NET MONTHLY TAKE HOME PAY.	\$ <u>2,000.00</u> (Varies)	\$ _____
Regular income from operation of business or profession (attach detailed statement).	\$ _____	\$ _____
Income from real property.	\$ <u>1,250.00</u>	\$ _____
Interest and dividends	\$ _____	\$ _____
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
Social Security or other governmental assistance (Specify).	\$ _____	\$ _____
Pension or retirement income	\$ _____	\$ _____
Other monthly income (specify)	\$ _____	\$ _____
TOTAL MONTHLY INCOME	\$ <u>3,250.00</u>	\$ _____

TOTAL COMBINED MONTHLY INCOME. \$ _____

SCHEDULE J
CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Monthly

Rent, mortgage payment or lot rent being paid directly by Debtor(s) not included in Chapter 13 payment	\$ <u>None</u>
Are real estate taxes included? <u> X </u> Yes <u> </u> No	
Is property insurance included? <u> X </u> Yes <u> </u> No	
Utilities: Electricity and heating fuel	BOTH PROPERTIES \$ <u>400.00</u>
Water and sewer.	\$ <u>130.00</u>
Telephone.	\$ <u>200.00</u>
Other.Cable.	\$ <u>120.00</u>
Home maintenance (repairs and upkeep).	\$ <u>100.00</u>
Food (include lunches)	\$ <u>100.00</u>
Clothing	\$ <u> </u>
Laundry and dry cleaning	\$ <u> </u>
Medical and dental expenses.	\$ <u> </u>
Child care	\$ <u> </u>
Transportation (not including car payments).	\$ <u>100.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>15.00</u>
Charitable contributions	\$ <u>200.00</u>
Insurance (not deducted from wages or included in home mortgage payments):	
Homeowner's or renter's.	\$ <u> </u>
Life	\$ <u>75.00</u>
Health	\$ <u> </u>
Auto	\$ <u>35.00</u>
Other.	\$ <u> </u>
Taxes (not deducted from wages or included in home mortgage payments) Specify.	\$ <u> </u>
Alimony, maintenance, and support paid to others	\$ <u> </u>
Payments for support of additional dependents not living at your home.	\$ <u> </u>
Regular expenses from operation of business, profession, or farm (attach detailed statement).	\$ <u> </u>
Other.	\$ <u> </u>
TOTAL MONTHLY EXPENSES	\$ <u>1,475.00</u>

SUMMARY

TOTAL INCOME	\$ <u>3,250.00</u>
TOTAL EXPENSES	\$ <u>1,475.00</u>
AMOUNT OF CHAPTER 13 PAYMENT	\$ <u>2,650.00</u>
EXCESS INCOME AFTER EXPENSES AND CHAPTER 13 PAYMENT.	\$ <u>-0- *</u>

*Debtor intends to seek part-time employment and/or roommate to supplement expenses.

PAYMENTS TO CREDITORS

List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days (insiders 1 year) immediately preceding the commencement of this case. (Married debtors must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Debtor paid \$2,000.00 to Saxton in February, 2003.

FORECLOSURES, EXECUTIONS AND ATTACHMENTS

Is any of your or your spouse's property, including real estate, involved in foreclosing proceedings in or out of court? If so, identify the property and the person foreclosing.

Wells Fargo is foreclosing on debtor's home - sale date was May 12, 2004.
Saxton Mortgage - sale date is June 14, 2004.

Has any of your or your spouse's property or income been attached, garnished or seized under any legal or equitable process on or within 90 days before the date of the filing of the original petition herein? (If so, describe the property seized, or person garnished and at whose suit.)

None

TRANSFERS, REPOSSESSIONS AND RETURNS

Has any of your or your spouse's property been transferred, returned, repossessed, or seized by the seller or by any other party, including a landlord on or within 90 days before the date of the filing of the original petition herein? (If so, give particulars including the name and address of the party getting the property and its description and value.)

None

COMPENSATION PAID OR PROMISED TO ATTORNEY FOR DEBTOR

If you have paid or agreed to pay (or transferred or agreed to transfer any property) to your attorney for services in connection with your case other than agreeing to pay such compensation as may be allowed by the Court to be paid from monies paid to the Trustee or for you account, then state:

None

PENDING OR PRIOR BANKRUPTCY

What proceeding under the Bankruptcy Code are now pending or have been previously brought by or against you or your spouse? State the location of the Bankruptcy Court, the nature and number of each proceeding, the date it was filed, and whether a discharge was granted or refused, the proceeding was dismissed, or a composition, arrangement, or plan was confirmed.

The debtor filed case number B-03-81126C-13D on March 31, 2003, which was dismissed March 23, 2004.

PAYMENTS RELATED TO DEBT COUNSELING OR BANKRUPTCY

List all payments made or property transferred by or on behalf of the Debtor to any persons, including attorneys, for consultation debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

None